



# BUILDING PERMIT APPLICATION

Date Received: \_\_\_\_\_

Permit #: \_\_\_\_\_

I. **Location of Building:** \_\_\_\_\_  
Number Street Tax Map Lot #

II. **Type of Building** All applicants complete parts: A, B, C, D, E, F & G

**A. Improvement**

- New Building
- Addition
- Alteration
- Repair
- Demolition
- Moving
- Foundation

**B. Ownership**

- Public
- Private

**C. Septic System**

- Public
- Private

**D. Water Supply**

- Public
- Private

**E. Shoreland Zone**

- Outside
- Within

**F. Wellhead Zone**

- Outside
- With-in 250'

**G. Proposed Uses**

Residential Uses:

- Single Family Dwelling
- No. of bedrooms ( \_\_\_\_ )
- Manufactured Home
- Mobile Home
- Tiny Home
- Two Family Dwelling
- No. of bedrooms ( \_\_\_\_ )
- Townhouses
- Residential Accessory
- Family Day Care
- Home Occupation
- Other

**H. Estimated Cost**

\$ \_\_\_\_\_

Non-Residential Uses:

- Assembly (> 1,000 seats)
- Assembly ( 300 to 999 seats)
- Assembly (50 to 299 seats)
- Business (Bank, Office, and Retail)
- Business (Restaurant < 49 seats)
- Educational – School
- Educational – Group Day Care
- Educational – Day Care Center
- Factory
- High Hazard
- Institutional – Hospital
- Institutional – Nursing Home
- Mercantile – (<3,000 Sq. Ft.)
- Mercantile – (3,001 to 29,000 Sq. Ft.)
- Mercantile – (>30,000 Sq. Ft.)
- Multi-family – (>2 Dwelling Units)
- Multi-family – Hotel, Motel, Inn
- Storage
- Tank
- Tower
- Utility

III. **Identification:**

\_\_\_\_\_ ( \_\_\_\_ ) \_\_\_\_\_  
Applicants Name (please print) Phone

\_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_ \_\_\_\_\_  
Number Street City/Town State Zip Code

\_\_\_\_\_ \_\_\_\_\_  
Signature of Applicant Date

IV. **Design Criteria:**

Ground Snow Load P/Sq. Ft.	Wind Design Speed (MPH)	Seismic Design Category	Weathering	Frost Line Depth	Ice Barrier Required	Flood Hazards	Air Freezing Index	Mean Annual Temperature
70 Lbs.	90	B	Severe	4 feet	Yes	Possible	2500	46°

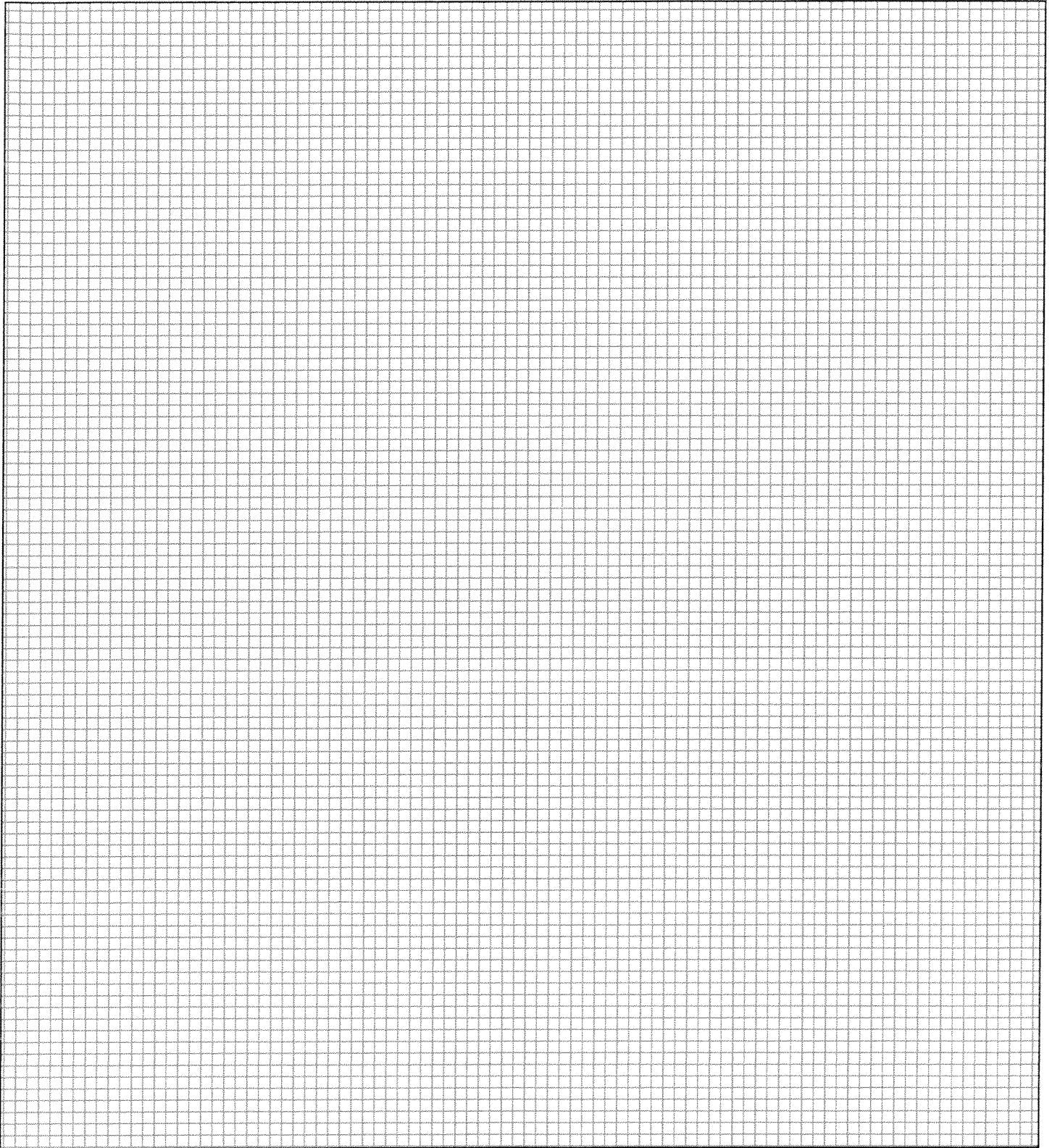
V. **Energy Conservation:**

Climate Zone	Glass U-Factor	Ceiling Trusses	Basement Wall	Wood Frame Wall	Wood Floor
6	0.35	Standard R49 Raised Heel R38	R/10	Insulation in the Cavity Wall: R/20 Insulation in the Cavity Wall: R/13 and R/5	R/30

**VI. Site Plan:**

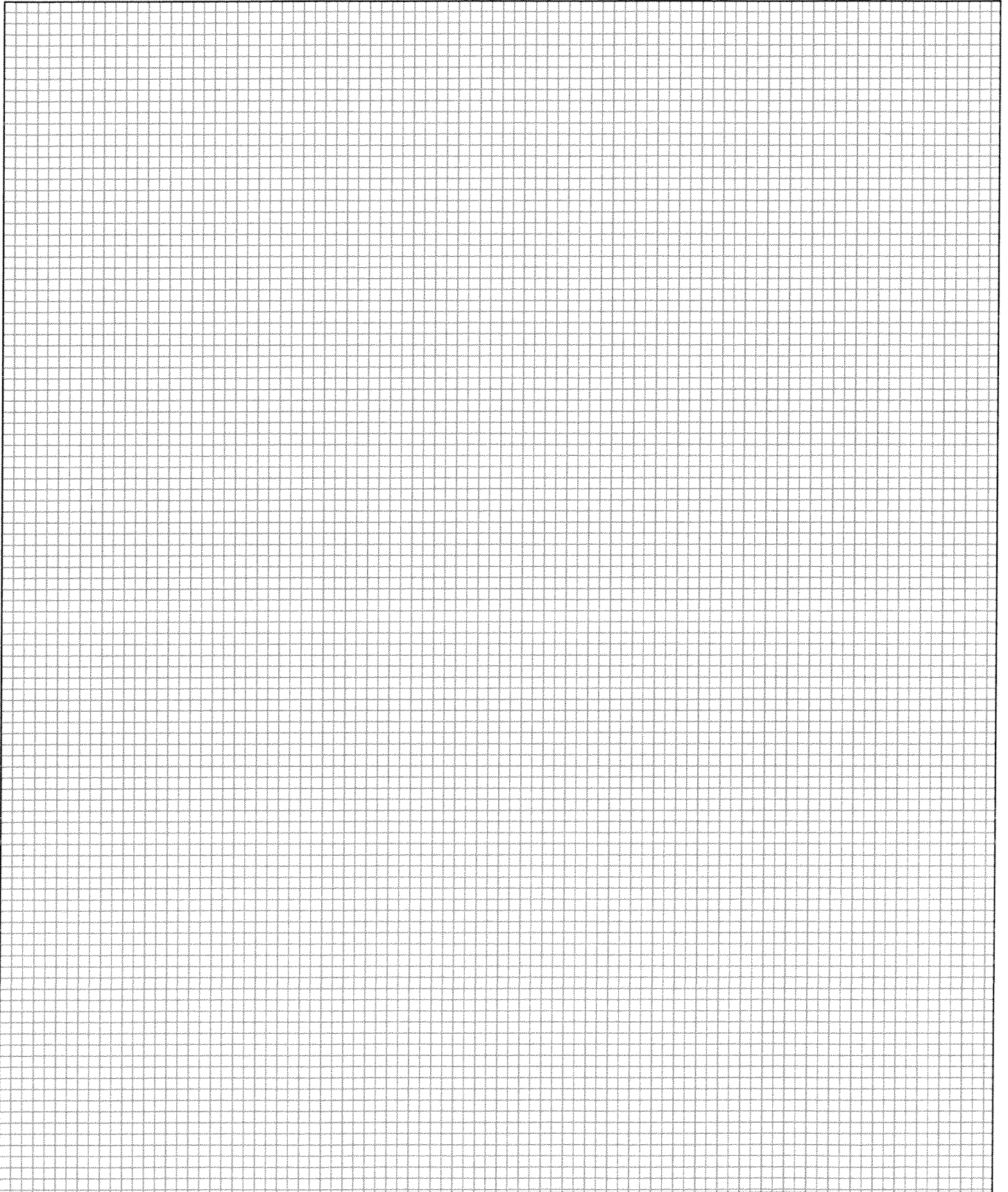
Show all lot lines, existing and proposed structures, septic system and well locations.

Show distances from structures to property lines, show distances between leach fields and all wells.



## VII. Building Plans

The International Residential Code requires the property owner to provide construction documents: “written, graphic and pictorial documents prepared or assembled for describing the design, location and physical characteristics of the elements of a project necessary for obtaining a building permit. Construction documents shall be drawn to scale.



**VIII. Special Conditions**

1. Call **DIG-SAFE** prior to ANY excavation, it's the LAW! (888) 344-7233
2. Erosion control measures SHALL be installed prior to ANY excavation
3. \_\_\_\_\_  
\_\_\_\_\_
4. \_\_\_\_\_  
\_\_\_\_\_
5. \_\_\_\_\_  
\_\_\_\_\_

<b>IX. Required Inspections</b>	Foundation / Slab on grade	(prior to pouring concrete)
	Framing	(prior to hanging drywall / plaster)
	Insulation	(prior to covering)
	Final Inspection	(prior to moving in)
	Septic System	(after scarification and prior to covering system)
	Interior Plumbing	(prior to concealing or covering)

The CEO/LPI is generally in the office on:

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
		8:00 – 4:00	8:00 – 12:00	8:00 – 4:00		

For inspections please call: (207) 872-2826

(\* ) Projects within the "Wellhead Protection Area" shall be reviewed and approved by the E. Vassalboro Water Company

I hereby certify that I have read and examined this document and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. I further certify that I am the owner or the owner's authorized agent and that the proposed work is authorized by the owner. I understand that work shall not begin until the permit is issued by the CEO/LPI, that I am responsible for calling for all required inspections, that work shall be accessible for inspection, that a final inspection, approval and Certificate of Occupancy are required prior to occupying this building. Every permit issued shall become invalid unless the work authorized by such permit is commenced within 180 days after its issuance, or if the time of work is commenced.

Owner/Owners Agent: \_\_\_\_\_ Date: \_\_\_\_\_  
*Signature*

Signed: \_\_\_\_\_ CEO/LPI Date: \_\_\_\_\_ Permit No. \_\_\_\_\_